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APPLICANTS

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**** CONTINUING DATA ******* *None M***** FOREIGN APPLICATIONS ******* *None M***IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 06/16/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>M</i> Examiner's Signature	Initials				

ADDRESS

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TITLE

Automatic taxi manager

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